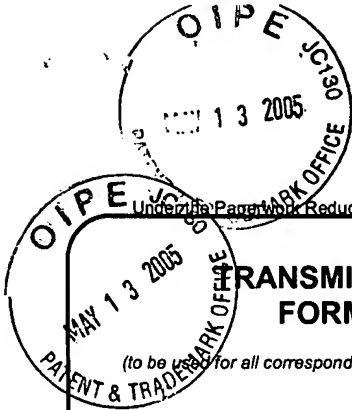


TFW



<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/828,812	
	Filing Date	April 21, 2004	
	First Named Inventor	Thomas Kruspe et al.	
	Art Unit	2859; Confirmation No.: 7285	
	Examiner Name	Louis M. Arana	
Total Number of Pages in This Submission	7	Attorney Docket Number	414-26759-USC

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s) - replacement	<input type="checkbox"/> After Allowance communication to Group
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<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Postcard; five (5) sheets of replacement formal drawings (Fig. 1-6)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	The Commissioner is hereby authorized to charge any additional fees or credit any overpayments to Deposit Account No. 02-0429 (414-26579-USC)	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kaushik P. Sriram, Reg. No. 43,150
Signature	
Date	May 10, 2005

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:  
**Thomas Kruspe et al.**

Serial No.: **10/828,812**

Filed: **April 21, 2004**

Title: **"Downhole NMR Processing"**

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Group Art Unit: **2859**

Confirmation No.: **7285**

Examiner: **Louis M. Arana**

Atty. Docket: **414-26579-USC**

MS: PG PUB DRAWINGS  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, Virginia 22313-1450

**CORRECTED/REPLACEMENT FORMAL DRAWINGS**

Applicant herewith submits five (5) sheets of corrected/replacement formal drawings (Figure 1 through 6) for the above-referenced patent application.

The Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. **02-0429 (414-26579-USC)**.

Respectfully submitted,

Date: May 10, 2005

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I hereby certify that this paper, along with any referred to as being attached or enclosed, is being forwarded with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to MS PG PUB DRAWINGS, Commissioner for Patents, Alexandria, Virginia 22313-1450, the 10th day of May, 2005.

  
Beth Pearson-Naul